



ANNUAL REPORT - DEPARTMENTAL DATA

STATE FORM 46241 R/6-07

**DO NOT FAX PLEASE TYPE OR PRINT CLEARLY DO NOT FAX**

Section 1: THE FOLLOWING INFORMATION IS USED TO MAINTAIN A STATEWIDE DATA BASE FOR TRACKING ANNUAL INSERVICE TRAINING. THE IDACS OR ORI NUMBER IS USED AS EACH DEPARTMENT'S ID NUMBER. PLEASE RESUBMIT WHENEVER ANY INFORMATION IN SECTION 1 CHANGES.

DEPARTMENT NAME _____ IDACS / ORI NUMBER _____

SPECIAL INSTRUCTIONS: SELECT THE APPROPRIATE BOX FROM THE BOXES BELOW. "TOWN (Metro)" REFERS TO THOSE TOWNS THAT HAVE A BOARD OF METROPOLITAN POLICE COMMISSIONERS. IF "OTHER", PLEASE DESCRIBE IN COMMENTS SECTION.

☐ CITY ☐ COUNTY ☐ STATE ☐ TOWN ☐ TOWN (Metro) ☐ AIRPORT
COLLEGE / UNIVERSITY: ☐ Public ☐ Private ☐ SCHOOL ☐ RAILROAD ☐ OTHER

ADDRESS _____ EMAIL ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

AREA CODE _____ PHONE _____ FAX _____ REPORT PREPARED BY (TYPE OR PRINT NAME) _____ DATE MM-DD-YY _____

SPECIAL INSTRUCTIONS: LIST THE CHIEF EXECUTIVE OFFICER (CEO) AND THE PRIMARY TRAINING COORDINATOR (PTC) FOR CONDUCTING AND REPORTING TRAINING. IF THE CHIEF EXECUTIVE OFFICER ALSO SERVES AS THE PRIMARY TRAINING COORDINATOR, PRINT "SAME" IN THE LAST NAME BOX FOR THE PTC.

CEO	LAST NAME	FIRST NAME	MIDDLE NAME	D.O.B.	TITLE
TO	LAST NAME	FIRST NAME	MIDDLE NAME	D.O.B.	RANK

* THE SOCIAL SECURITY NUMBER OF THIS INDIVIDUAL IS BEING REQUESTED AS AN EXCHANGE OF INFORMATION BETWEEN AGENCIES, PROVIDED FOR BY IC 4-1-6-2. DISCLOSURE IS NECESSARY TO FULFILL A STATUTORY MANDATE AND CONFIDENTIALITY OF THE SOCIAL SECURITY NUMBER WILL BE MAINTAINED BY THE LAW ENFORCEMENT TRAINING BOARD AS PROVIDED BY LAW.

Section 2: THE FOLLOWING INFORMATION IS USED TO VERIFY THE NUMBER OF ANNUAL INSERVICE TRAINING REPORTS SUBMITTED EACH YEAR, AND TO COMPILE STATEWIDE EEOC DATA. THIS INFORMATION IS ONLY NEEDED ONCE A YEAR AND DOES NOT NEED TO BE UPDATED AS DOES SECTION 1.

DEPARTMENT STRENGTH (ON DECEMBER 31,)	FULL TIME	PART TIME	RESERVE STATUS	EEOC CLASSIFICATION FOR SWORN FULL/PART-TIME OFFICERS ONLY (Do not include Reserve Officers or Civilian Personnel in these totals.)							
CAPTAINS AND ABOVE INCLUDING CHIEF OR SHERIFF				MALE	FEMALE	AMERICAN INDIAN	ASIAN AMERICAN	BLACK	HISPANIC	WHITE	OTHER
LIEUTENANTS											
SERGEANTS (ALL GRADES)				COMMENTS BY REPORTING AGENCY							
CORPORALS											
NON-RANKED OFFICERS											
TOTAL NUMBER OF SWORN OFFICERS											
DEPARTMENT STRENGTH (ON DECEMBER 31,)	FULL TIME	PART TIME	TOTAL CIVILIAN								
JAIL OFFICERS											
COMMUNICATION OFFICERS											

SECTION 3: DO NOT WRITE BELOW THIS LINE FOR LETB USE ONLY DO NOT WRITE BELOW THIS LINE

SEND COMPLETED FORM TO:

EXECUTIVE DIRECTOR
LAW ENFORCEMENT TRAINING BOARD
POST OFFICE BOX 313
PLAINFIELD, IN 46168-0313